

29W516 Wilson Street West Chicago, IL 60185 630.407.7679 ourfamilypetsitting@gmail.com ourfamilypetsittin.com

Necessary documents <u>PRIOR</u> to your first visit. Here is a check list for your convenience.

Schedule a ½ day trial for temperament testing.
\$20 per dog

We need a ½ day to introduce your furry loved one into our open pack environment and assess if it is the right fit for their personality. We don't want any pups to experience anxiety or aggression. Therefore, they will be supervised the entire stay by one of our team members, photo updates will be sent and a verbal assessment will be provided at the end of the trial date. **ALWAYS use the convenient BOOK NOW** button on our website to request your date & time (AM or PM pickups etc.) and service requests.

 Copy & paste this link into your browser <u>https://1drv.ms/xs/s!AhBVhAYmOW5jhTVRKJQN5nY6lyd0</u> and fill out our electronic database, or just simply click on the database button on our website.

- □ Contact your vet and have them email us a copy of the most recent shot record with current vaccinations: We require:
- Rabies
- Bordetella
- Parvo, Lepto, Distemper combo
- Flea & Tick treatment

Complete and sign 3 waivers



Client Name (Parents):	
Address:	
Primary Phone:	
Secondary Phone:	
E-mail:	
Emergency Contact:	Name:
	Phone:
Primary Vet:	Name:
	Phone:

Pet's Name	Breed	
	Pet's Name	Pet's Name Breed

	Pet's Name	Breed	
2.			
Notes: Use back if needed			

Release Form for Media Recording

Our Family Pet Sitting enjoys taking photos and videos of our visits and as a complimentary service we provide human families a daily photo via text message regarding their pets' wellbeing.

I, the undersigned, do hereby consent and agree that Our Family Pet Sitting, its owners, employees, or agents have the right to take photographs, videotape, or digital recordings of my pets, to use these in any and all media, now or hereafter known. I further consent that my pets' first name only may be revealed therein or by descriptive text or commentary.

I do hereby release to Our Family Pet Sitting, its owners, agents, and employees all rights to exhibit this work in print and electronic form publicly or privately to promote business and create client testimonials. I waive any rights, claims, or interest I may have to control the use of my pets' photos in whatever media used. Our Family Pet Sitting agrees that if I provide a request in writing to stop publication of my pet's photos they will respectfully comply.

I understand that there will be no financial or other compensation for recording my pets, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Name	
Address	
Phone Helly Witness for the undersigned	
Signature	Date
Pets Names:	

OUR FAMILY PET SITTING, LLC 29W516 Wilson St, West Chicago, IL 60185 630.407.7679 www.ourfamilypetsittin.com | ourfamilypetsitting@gmail.com



WAIVER, HOLD HARMLESS, & RELEASE OF INDEMNITY AGREEMENT

Please understand this is precautionary only. Our Family prides itself on the constant attention and supervision given to each client. However, Pets are unpredictable at times. We will contact you immediately if anything should happen to your loved one during his/her time with us and will provide immediate and superb care if needed.

Owner's Name:

Pet(s) Name(s):

The Agreement between OUR FAMILY PET SITTING, LLC and OWNER is as follows:

OWNER understands there maybe risks involved with their Pet attending a day care facility. OWNER agrees to be solely responsible for all acts and problems attributed to their Pet at any time during the term of this Agreement, including but not limited to any medical bills which may be incurred as a result of the behavior of their Pet. In no case shall OUR FAMILY PET SITTING, LLC be liable for the OWNER'S Pet's acts and behaviors other than for the exercise of gross negligence on the part of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees, in the keeping of their Pet.

OUR FAMILY PET SITTING, LLC will always exercise responsible, usual and ordinary care of all of the Pets in their possession and control. OUR FAMILY PET SITTING, LLC shall not be under any obligation to guard against injuries which it has no reason to expect to occur because of the disposition of an individual Pet.

OUR FAMILY PET SITTING, LLC has agreed to provide superior attention and day care boarding to the OWNER and its Pet. OWNER agrees to disclose any and all tendencies of their Pet to OUR FAMILY PET SITTING, LLC including but not limited to food allergies, tendencies to bite, attack or scratch, any mischievousness, vicious or violent behaviors, or any other condition which might affect their Pet or the Pets of other Owners. OWNER also understands their Pet may be grouped with other dogs in a social environment. OWNER agrees to be solely responsible for all acts of their Pet during the term of this Agreement and, if appropriate, liable for any damages their Pet causes to any other Pet or person including but not limited to medical bills, veterinary bills, or any other liability which may occur. OWNER agrees OUR FAMILY PET SITTING, LLC shall not be liable to OWNER or any other third party which may result from the behavior, actions or damages caused by OWNER'S Pet except for gross negligence on the part of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees in the keeping of the Pet.

OUR FAMILY PET SITTING, LLC shall not be held liable and OWNER shall hold OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees harmless and indemnified thereon for any claims, damages, injuries, cause of action, death, medical bills, veterinarian bills, or other costs and expenses whatsoever OUR FAMILY PET SITTING, LLC or any other third party may incur as a result of the Pet's actions during the time the Pet is on the property of OUR FAMILY PET SITTING, LLC. The parties specifically agree any gross negligence or intentional act of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees is specifically excluded from this Agreement.

OWNER'S INFORMATION:

Name:				

Phone: _____

Signature

Date

Liability Waiver Regarding Personal Items We don't want to send home sad friends or pup parents

I, _____, am fully aware that **Our Family Pet Sitting LLC** assumes no responsibility or liability for any personal items I choose to leave here with my dog.

I understand that **Our Family Pet Sitting LLC** RECOMMENDS that I ONLY bring food, medication and treats for my pup because they provide clean beds, blankets, toys, and bowls.

By signing below, I agree to the fact that if I choose to have **Our Family Pet Sitting LLC** take my personal belongings I recognize that I may not receive them in the same condition, or they may be lost or broken. I understand that **Our Family Pet Sitting LLC** advised me against this and will assume no responsibility for these belongings.

Signature of Participant:	
Name of dog(s):	_
Date:	
Signature of staff member: Thelight Genand, awner	

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ABSENT OWNER CONSENT FORM MEDICAL RELEASE

To be filled out by the owner in case their pet(s) need(s) emergency treatment during their stay.

Owner Name:	 	 	
Pet(s) Name(s):	 	 	
Phone Number:	 	 	
Address:	 	 	
Contact Number(s) while you are away:	 		
Special information we need to know about your pet:			
about your pot.	 <u> </u>	 	

Please check one of the following statements:

The agent above is responsible for my pet(s) while I am away and will be able to make all decisions regarding veterinary care. They will make every effort to contact me regarding veterinary care.

The agent above is responsible for my pet(s) while I am away. For decisions regarding veterinary care, I wish to be contacted. If I cannot be reached, I appoint the following person to act on my behalf:

Name: _____

Phone: _____

Client Signature

Date

Non - Spayed & Neutered dogs

Our family pet sitting, LLC <u>does not turn away non-spayed and</u> <u>non-neutered dogs</u>. Here is our policy.

Spot won't need to ask the owner if that dog is intact, nor will he have to take a peak under to check for any missing parts. His nose, just knows. How? **Intact males have a different smell than other dogs**. Indeed "intact males retain the ability to mate and give of the scent of male, **which can be considered a threat to neutered males**" explains trainer and behavior consultant Karen Fazio. The hormone testosterone is what gives a dog his "maleness" scent. Interestingly, when dogs reach 10 months, there's a peak in this smell as testosterone levels in the adolescent male dog may be five to seven times greater than the levels of an adult!

This "male" scent may cause neutered dogs to react negatively towards them causing tension and even aggressive displays. When an intact male enters a dog park, you can almost feel tension in the air. There is belief that neutered dogs, on the other hand, seem to smell quite similar to females, yet it would be interesting to know if there's any actual proof of this. How can we know if we can't ask dogs?

Your pups receive 24 hour supervision while visiting Our Family Pet Sitting; however you will need to sign this waiver releasing OUR FAMILY PET SITTING, LLC from ALL liability, and OWNER shall hold OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees harmless and indemnified thereon for <u>any</u> claims, unwanted pregnancies, damages, injuries, cause of action, death, medical bills, veterinarian bills, or other costs and expenses whatsoever OUR F AMILY PET SITTING, LLC or any other third party may incur as a result of the Pet's actions during the time the Pet is on the property of OUR FAMILY PET SITTING, LLC. The parties specifically agree any gross negligence or intentional act of OUR FAMILY PET SITTING, LLC, its officers, owners, agents and/or employees is specifically excluded from this Agreement.

Owner's Information and agreement to terms:

Signature	Date	Email
Signature	Date	Email